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ABSTRACT

This paper presents a consultative model for providing behavioral supports within the context of a public school setting to students with developmental disabilities who display challenging behaviors. The suggested model is contrasted with the traditional consultation model in which a consultant comes from outside the immediate problem situation, provides support, and eventually withdraws from the problem. In the suggested model, there is ongoing follow-along, with direct consultation provided by an outside consultant who transfers his skills over time to a team of on-site professionals. Components of this model include: (1) identification of targets and objectives for implementation; (2) determination of roles and functions of team members; (3) identification of competencies required of team members; (4) provision of inservice training on the necessary knowledge base, with an emphasis on functional assessment and treatment integrity; (5) planning for program evaluation; and (6) ongoing follow-along. (Contains 17 references.) (DB)

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Running Head: CONSULTATIVE MODEL

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A Consultative Model for Providing Behavioral Supports to Children with Challenging Behavior

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Abstract

As classroom teachers and school systems are confronted with students with disabilities who exhibit challenging behavior the need for a systems-wide model becomes more apparent within these settings to provide effective services and supports to these students and to the personnel involved in providing instruction and related services. The purpose of this paper is to present a consultative model for providing behavioral supports within the context of a public school setting to students with developmental disabilities who display challenging behavior. A rationale for the formation of a consultative behavioral support team within a school program and strategies for promoting the on-going use of such a model are described.

A Consultative Model for Providing Behavioral Supports to Children with Challenging Behavior: Practical Approaches

Classroom teachers and school systems are becoming increasingly confronted with how to effectively provide educational services and supports to students with disabilities who engage in severe and challenging forms of behavior. Many schools have chosen to utilize behavior management programs which center on maintaining discipline and classroom management often relying on a system comprised of rewards and punishing consequences ranging from verbal reprimands to corporal punishment (Evans & Richardson, 1995) in some instances. These methods have been referred to by Durand (1990) as "rapid suppression methods" which are primarily aimed at the immediate reduction or elimination of the problem behavior. The use of these procedures typically provides a temporary relief from the problematic behavior, but do little to promote lasting change and often do not teach alternative behaviors to the student in question.

Another issue related to this problem which continues to plague school systems is how to intervene with specific students when traditional behavior management approaches fail to provide desired results. When school systems are challenged by students with disabilities who experience more chronic and severe forms of challenging behavior they often rely on behavioral consultants to provide the necessary technical assistance in the hope of obtaining additional support. Although the use of behavioral consultants can have positive effects the shortcoming of this practice is that systemic change becomes more difficult to realize because the consultant's services are time-limited and possibly philosophically different from that of

the school personnel thus affecting the implementation and maintenance of a consultant's recommendations.

A potential solution to these on-going problems is to utilize a consultative model in the implementation of best and effective practices aimed at providing behavioral supports to students with challenging behavior. The aim of this model is the development of school-based behavioral support teams designed to provide assessment and intervention in the area of challenging behavior. Such a model would rely on the services of a consultant trained in the area of applied behavior analysis and functional assessment but the main objective would be the development of school-based teams who would bear responsibility for maintenance and subsequent implementation of behavioral interventions within the school setting.

The use of a consultative model presents a plausible model for the introduction of functional assessment procedures and the development of behavioral support teams within schools. Hawryluk and Smallwood (1986) describe consultation within school settings as a process which "is based on the premise that positive change in student behavior can be produced indirectly when a consultant engages with teachers or school personnel in collaborative problem solving" (p. 519). This implies that when a consultant works within a school setting change is likely to be attributed to a reactive effect rather than through a more direct and deliberate plan designed to evoke change in student behavior. The inherent drawback to such a perspective is that one cannot reliably identify and evaluate why change occurred and what was responsible for promoting change. Functional assessment on the other hand represents an "active teaching" approach directed at determining measurable relationships between problematic behavior and the setting events which occasion these

responses in students. Functional assessment attempts to determine under what conditions the problematic behavior occurred and/or did not occur? Upon determining these relationships interventions can then be planned and evaluated. Given that interventions are developed and implemented in isolation the role of a collaborative team enhances both in the development and implementation phases provided that the team is functioning from a shared knowledge and philosophical framework.

Within the area of behavioral intervention, the use of functional assessment has received notable attention by researchers in the field of applied behavior analysis. It is a recommended as an effective practice for dealing with challenging behavior experienced by students with disabilities. This methodology has been strongly advocated by professionals in the fields of special education and psychology as the method of choice when compared to rapid suppression methods. Several studies have demonstrated the efficacy of these procedures in the assessment and intervention of problematic behaviors displayed by students with disabilities in school settings (Dunlap, DePerczel, Clarke, Wilson, Wright, White, & Gomez, 1994; Dunlap & Kerr , 1993; Durand & Carr, 1991; Foster-Johnson, Ferro, & Dunlap, 1994; Lennox & Miltenberger, 1989; Munk & Repp, 1994; Touchette, MacDonald, & Langer, 1985). These studies have provided researchers and practitioners with an enhanced understanding about the functional relationship (cause/effect) between antecedent variables and various forms of problematic behavior including aggression, self-injury, noncompliance, and stereotypy in students with disabilities (Horner, Day, Sprague, O'Brien, & Heathfield, 1991; Iwata, Dorsey, Slifer, Bauman, & Richman, 1982; Reichle & Johnston, 1993).

Despite the contribution made by these studies, functional assessment procedures are under utilized if utilized at all in school settings when dealing with challenging behavior. The reluctance of school personnel to employ these procedures is strongly related to their perceived difficulty in implementing, the limited supports available to classroom teachers, high case loads encountered by school psychologists and counselors, and the lack of administrative follow-along necessary for ensuring the integrity of these procedures over time. As a result, school systems often resort to the use of procedures that are perceived as easier to implement and that are viewed as cost and time efficient. Paisey, Whitney, and Hislop (1990) recommended that the use of more intrusive procedures is directly related to the perceived cost of implementing more pro-active procedures such as in the case of functional assessment.

The validation of the use of functional assessment procedures within school settings is a pressing question that researchers must attempt to answer to enhance their level of acceptance by school personnel. The use of these procedures must be defined from an operational perspective if schools and students are to fully benefit. Data from preliminary studies appears to indicate that the use of a consultant and technical assistance team may be beneficial in the deployment of these procedures within school settings. Northrup, Wacker, Berg, Kelly, Sasso, and DeRaad (1994) evaluated the utility of functional analysis procedures with school personnel. This study consisted of teachers and related service professionals within classroom settings using functional analysis and reinforced-based treatment procedures within the framework of a technical assistance model. Functional analysis is a component of the functional assessment process and involves the experimental manipulation of probable

antecedent conditions and noting the effects of these manipulations on the target behavior.

Northrup and colleagues (1994) utilized a consultation package which consisted of an in-service workshop to familiarize participants with the technical methodology, on-site technical assistance consisting of two to four visits per month working in conjunction with transdiciplinary teams consisting of local school personnel. There were 5 students who participated in this investigation ranging in age from 5-11 years and all displayed severe and challenging forms of behavior which included self-injury and aggression. Results of this investigation demonstrated that school personnel could effectively implement these procedures within their classroom settings yielding positive behavior change for each of the 5 students who participated in the study for a period of approximately 18 months. One caveat of this study concerned the treatment integrity or the consistency with which interventions were carried out. There was some noted variability in this area across students, however the results obtained through the use of a reversal design supported the use of the treatment package in reducing high levels of problematic behavior in each of the students. Another major finding from this study that was noteworthy was that the technical assistance could not be totally withdrawn even over an extended time period. This finding supports the need for a support team with given expertise in this area to conduct follow-along on interventions. Frequently, this is not feasible when using outside consultants, however this could be made possible with the development of school or district-wide behavioral support teams provided that team members displayed the necessary technical proficiency.

Consultation within schools may take on many forms and almost always includes the use of outside personnel contracted to render their expertise for a period of time. This form

often involves the use of university-based personnel trained in the area of special education or psychology who have an expertise in applied behavior analysis and functional assessment. A possible variation on this theme often entails the use of a school-based consultant such as a school psychologist or school counselor assisting an individual teacher or team of teachers in the provision of behavioral supports. The one common characteristic of consultation as noted by Budde and Summers (1991) is that a consultant comes from outside the immediate problem situation and provides support and eventually withdraws from the problem.

One alternative to this tradition is to use a model which is designed to provide on-going follow-along with direct consultation provided by an outside consultant being transferred over time to a team of professionals based on-site. Although, the role of the outside consultant would gradually diminish over time the goal of the consultation would be to assemble a team of professionals within a school who would receive training in the use of behavioral interventions and in the development of behavioral supports. The team would then be charged with the responsibility of providing these services or serving in other roles such as a referral team within an individual school or district. The following section will describe the components associated with this model.

Components of the Model

For a consultative model to be fully effective the consultant and school or classroom-based team must first mutually identify a plan of operation consisting of the necessary components, and how consultative services will be provided. This will vary according to each situation and will be situational and problem specific. These preliminary components should first be identified before services are actually rendered. These components include:

Identify Targets and Objectives for Implementation

Upon receiving a request for consultative services in the area of behavioral supports, the consultant must arrange to meet with the local school or classroom personnel. The school personnel would identify the presenting problem, the targeted objectives, and desired outcomes. In addition, proper time lines for implementation and follow-along should be projected.

Roles and Functions of Team Members

The development of a school-based or in-house team should be done immediately and preferably before the development of a plan of operation. The team should ideally be comprised of the parents of the child, the classroom teacher, the school psychologist, school counselor, the building principal, the consultant who should be skilled in the area of behavioral consultation and the use of functional assessment procedures, and the remainder of the team could be comprised of additional related services personnel. The roles and functions of each team member should be jointly identified with the consultant serving as the team leader.

Identification of Competencies Required of Team Members

The competencies needed by team members should be identified. In the case of team members who do not possess the necessary knowledge and skills a series of in-service training seminars should be provided.

In-service on Necessary Knowledge Base

To ensure that the plan of operation developed by the consultant and school-based team will be correctly implemented by team members and other staff, an in-service or series

of in-service seminars are necessary. The content of these seminars should be determined according to the experience and knowledge levels of team members, however the content must include components related to the philosophy of non-aversive behavioral intervention, assessment (data collection, observation, and recording procedures), intervention (components of the intervention plan) and the roles and functions of each team member. Specific assessment and intervention components should include the use of (a) functional assessment interview; (b) scatter plot assessment; (c) observational recording methods such as A-B-C (Antecedent-Behavior-Consequence) recording; (d) inter-oberserver reliability; (e) recording baseline assessment data; (f) components of effective instruction; (g) reinforcement strategies; and (h) program evaluation. Table 1 illustrates the competencies that should be trained as part of the in-service training package.

Other features of the in-service should focus on the importance of commitment among team members, strategies for teaming, communication, conflict resolution among team members, and the concept of individual expertise and shared knowledge among all team members. These concepts are frequently found within transdiciplinary approaches. Given that school programs and staff members have numerous responsibilities such a model would be assistive in promoting consistency within the assessment, intervention, and follow-along phases of behavioral intervention as the consultant gradually turns responsibility over to the school-based team. The need for consistency is vital to the success and integrity of the intervention. Gresham, Gansle, & Noell (1993) have referred to this as treatment integrity. Treatment integrity refers to the degree in which the intervention is implemented as planned. Failure to maintain this degree of rigor is detrimental when attempting to conduct a functional

assessment of variables influencing the occurrence of challenging behavior in students with disabilities.

Program Evaluation

A plan for program evaluation must be developed with expected time lines for assessment and intervention activities. Evaluation activities should focus on both process and outcome evaluation. Scheduled meeting times to review program data should be included as part of the evaluation process.

On-going Follow-Along

As the consultant begins to fade and allow the school-based team to assume greater levels of responsibility a plan for ensuring quality follow-along services should be developed. Follow-along services provided by the consultant should include scheduled visitations to the school, involvement as needed in team decisions, and a plan for involvement in the case of more urgent crisis intervention needs.

Discussion

The purpose of this paper has been to describe how a consultative model can be used to provide behavioral supports to students with challenging behavior in school settings with the major goal of the consultation being the development of school-based behavioral support teams. School systems will be confronted with the challenges of providing educational services and supports to students with disabilities who engage in problematic behavior. In order to be fully effective in meeting these challenges, school personnel must be prepared with a knowledge base that will enhance their level of understanding about the origins of challenging behavior, the function(s) that these behaviors serve for students with disabilities,

and methods for conducting functional assessment and the development of pro-active interventions. In addition, they must be prepared to provide these services and supports through a systematic and team oriented model. The use of a behavioral consultant can assist school systems and school personnel in the formation of these competencies and a model for the delivery of behavioral supports.

For behavioral consultation to be most meaningful, the development of school-based teams is essential in the mutual formation of goals, objectives, time lines for implementation, and a conceptual model designed to meet the specific needs of the school and individual student needs. Since consultation services are time-limited the formation of school-based teams to provide long-term and on-going support services is central. If schools are to fully realize their capability in providing optimal educational services and supports to all students the use of behavioral consultants to assist in the development of school-based teams designed to provide pro-active behavioral supports to students with disabilities is most needed. The use of such a model could provide teachers with much needed support when confronted with students who engage in problematic behavior. Currently, the support to teachers is limited given high case loads experienced by school psychologists and counselors. The use of a behavioral consultant to assist in the development of a model designed to elicit mutual supports to teachers and other school personnel represents a win-win situation for both school personnel and students who display problematic behavior through the lasting efforts of school-based behavioral support teams.

References

Budde, J.F., & Summers, J.A. (1991). Consultation and technical assistance. In J.L. Matson & J.A. Mulick (Eds.). Handbook of Mental Retardation (2nd ed.). New York: Pergamon Press.

Dunlap, G., DePerczel, M., Clarke, Wilson, D., Wright, S., White, R., & Gomez, A. (1994). Choice making to promote adaptive behavior for students with emotional and behavioral challenges. Journal of Applied Behavior Analysis, 27, 505-518.

Dunlap, G., & Kern, L. (1993). Assessment and intervention for children within the instructional curriculum. In J. Reichle & D.P. Wacker (eds.). Communicative alternatives to challenging behavior: Integrating functional assessment and intervention strategies (pp. 177-203). Baltimore: Paul H. Brookes.

Durand, V.M. (1990). Severe behavior problems: A functional communication training approach. New York: Guilford Press.

Durand, V.M., & Carr, E.G. (1991). Functional communication training to reduce challenging behavior: Maintenance and application in new settings. Journal of Applied Behavior Analysis, 24, 251-264.

Evans, E.D., & Richardson, R.C. (1995). Corporal punishment: What teachers should know. Teaching Exceptional Children, 27, (2), 33-36.

Foster-Johnson, L., Ferro, J., & Dunlap, G. (1994). Preferred curricular activities and reduced problem behaviors in students with intellectual disabilities. Journal of Applied Behavior Analysis, 27, 493-504.

Gresham, F.M., Gansle, K.A., & Noell, G.H. (1993). Treatment integrity in applied

behavior analysis with children. Journal of Applied Behavior Analysis, 26, 257-263.

Hawryluk, M.K., & Smallwood, D.L. (1986). Assessing and addressing the consultee variables in school-based behavioral consultation. School Psychology Review, 15, 519-528.

Horner, R.H., Day, H.M., Sprague, J., O'Brien, M., & Heathfield, L.T. (1991). Interspersed requests: A nonaversive procedure for reducing aggression and self-injury during instruction. Journal of Applied Behavior Analysis, 24, 265-278.

Iwata, B.A., Dorsey, M.F., Slifer, K.J., Bauman, K.E., & Richman, G.S. (1982). Toward a functional analysis of self-injury. Analysis and Intervention in Developmental Disabilities, 2, 3-20.

Lennox, D.B., & Miltenberger, R.G. (1989). Conducting a functional assessment of problem behavior in applied settings. Journal of the Association for Persons with Severe Handicaps, 14, 304-311.

Munk, D.D., & Repp, A.C. (1994). The relationship between instructional variables and problem behavior: A review. Exceptional Children, 60, 390-401.

Northrup, J., Wacker, D.P., Berg, W.K., Kelly, L., Sasso, G., & DeRaad, A., (1994). The treatment of severe behavior problems in school settings using a technical assistance model. Journal of Applied Behavior Analysis, 27, 33-48.

Paisey, T.J., Whitney, R.B., & Hislop, P.M. (1990). Client characteristics and treatment selection: Legitimate influences and misleading influences. In A.C. Repp & N.N. Singh (Eds.). Perspectives on the use of nonaversive and aversive interventions for persons with developmental disabilities (pp. 175-197). Sycamore, IL: Sycamore.

Reichle, J., & Johnston, S.S. (1993). Replacing challenging behavior: The role of communication intervention. Topics in Language Disorders, 13, 61-76.

Touchette, P.E., MacDonald, R.F., & Langer, S.N. (1985). A scatter plot for identifying stimulus control of problem behavior. Journal of Applied Behavior Analysis, 18, 343-351.